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APPLICANTS

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** CONTINUING DATA **** *[Signature]*** FOREIGN APPLICATIONS **** *[Signature]***IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

05/26/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	TX	3	14	3
Verified and Acknowledged	Allowance <i>[Signature]</i> Examiner's Signature <i>[Signature]</i>	Met after <i>[Signature]</i> Initials <i>[Signature]</i>			

ADDRESS

60533

TITLE

Multiple options to decline authorization of payment card charges

FILING FEE RECEIVED 936	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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